



3761 -  
Image

## SUPPLEMENTAL APPLICATION DATA SHEET

### Application Information

Application Number:: 10/500,330 ✓

Filing Date:: February 14, 2005

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: SYRINGE

Attorney Docket Number:: 029650-150

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 7

Small Entity?: No

Latin Name::

Variety Denomination Name::

Petition Included?: No

Petition Type:

Licensed US Govt. Agency:

Contract or Grant Numbers:

Secrecy Order in Parent Appl.?: No

### **Applicant Information**

Applicant Authority Type: Inventor

Primary Citizenship Country: Japan

Status: Full Capacity

Given Name: Kouichi

Middle Name:

Family Name: TACHIKAWA

Name Suffix:

City of Residence:

State or Province of Residence: Yamanashi

Country of Residence: Japan

Street of Mailing Address: c/o Terumo Kabushiki Kaisha, 1727-1, Tsuiji-Arai, Shouwa-cho

City of Mailing Address: Nakakoma-gun

State or Province of Mailing Address: Yamanashi

Country of Mailing Address: Japan

Postal or Zip Code of Mailing Address: 409-3853

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Japan  
Status:: Full Capacity  
Given Name:: Masaaki  
Middle Name::  
Family Name:: KASAI  
Name Suffix::  
City of Residence::  
State or Province of Residence:: Yamanashi  
Country of Residence:: Japan  
Street of Mailing Address:: c/o Terumo Kabushiki Kaisha, 1727-1, Tsuiji-Arai, Shouwa-cho  
City of Mailing Address:: Nakakoma-gun  
State or Province of Mailing Address:: Yamanashi  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 409-3853

### **Correspondence Information**

Correspondence Customer Number:: 21839  
Phone Number:: (703) 836-6620  
Fax Number:: (703) 836-2021

### **Representative Information**

Representative Customer Number:: 21839

### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	National Stage of	PCT/JP/13531	12/25/02

### **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
Japan	2001-401905	12/28/01	Yes

### **Assignee Information**

Assignee Name::	TERUMO KABUSHIKI KAISHA
Street of Mailing Address::	44-1, Hatagaya 2-chome
City of Mailing Address::	Shibuya-ku
State or Province of Mailing Address::	Tokyo
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	151-0072